UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235–0076
Expires: April 30, 2008
Estimated average burden
hours per response ... 16.00



Name of Offering (cheek if this is an amendment and name has changed, and indicate change.) Series C Preferred Stock and Common Stock issuable upon Conversion of Series C Preferred Stock File Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Kosmix Corporation Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 444 Castro Street, Suite 109, Mountain View, CA 94041 (650) 938-5900 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) Same Brief Description of Business Development of computer software Type of Business Organization Corporation limited partnership, already formed other (please specify): business trust limited partnership, to be formed Month Year Actual or Estimated Date of Incorporation or Organization: Actual ☐ Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State; CN for Canada; FN for other foreign jurisdiction)

GENERAL INSTRUCTIONS

RECEIVED

2 2006

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. Or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

er. SEC 1972 (2-99) 24386/00012/DOCS/1627839.2

2. Enter the information re-	guested for the foll		IFICATION DATA				
	-	er has been organized with	nin the past five years;				
		wer to vote or dispose, or	r direct the vote or dispos	ition of, 10% or	more of a class of equity		
securities of the issue	•						
		partnership issuers and of co	orporate general and manag	ing partners of pa	rtnership issuers; and		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	⊠ Director	General and/or Managing Partner		
Full Name (Last name first, it	f individual)			····			
Rajaraman, Anan	d						
Business or Residence Addre c/o Cosmix Corpo		reet, City, State, Zip Code) Street, Suite 109, Mount					
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, it	f individual)						
Harinarayan, Ven	katesh						
Business or Residence Addre	ss (Number and St	reet, City, State, Zip Code)					
c/o Cosmix Corpor	ration, 444 Castro	Street, Suite 109, Mount	ain View, CA 94041				
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner		
Full Name (Last name first, it	,						
Anand Rajaramar							
Business or Residence Addre							
<u></u>	<u>–</u>	Street, Suite 109, Mount					
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner		
Full Name (Last name first, it							
Accel IX, L.P. (and		<u> </u>					
Business or Residence Addre c/o Richard Zamb	•	reet, City, State, Zip Code) ty Avenue, Palo Alto, CA					
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner		
Full Name (Last name first, it Dalzell, Richard I	•						
Business or Residence Addre P.O. Box 269E, Mo							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, if Explore Holdings	,						
Business or Residence Address 1201 3rd Avenue, F	ss (Number and Str						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner		
Full Name (Last name first, it	findividual)				minging i mulei		
	,	P. (and affiliated entities)					
Business or Residence Addre							
	•	00 Sand Hill Rd., Menlo					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	□ Director	General and/or Managing Partner		
Full Name (Last name first, if	individual)		· · · · · · · · · · · · · · · · · · ·				
Mhatre, Ravi	ŕ						
Business or Residence Addre	ss (Number and Str	reet, City, State, Zip Code)					
c/o Lightspeed Venture Partners, 2200 Sand Hill Rd., Menlo Park, CA 94025							

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director General and/or Managing Partner Full Name (Last name first, if individual) Ranzetta, Theresia Gouw Business or Residence Address (Number and Street, City, State, Zip Code) c/o Accel Partners, 428 University Avenue, Palo Alto, CA 94301 ☐ Beneficial Owner ☐ Executive Officer Check Box(es) that Apply: ☐ Promoter ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner ☐ Executive Officer ☐ Director Check Box(es) that Apply: ☐ Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner ☐ Executive Officer Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

						B. INFOR	MATION	ABOUT O	FFERING				
1.	Has the	issuer s	old, or do	es the issu					in this offer	•		Yes	No ⊠
2.	What is	the min	imum inv	estment th	ıat will be	accepted f	rom any inc	lividual?				\$ <u>N/A</u>	·
3.	Does th	e offerin	ig permit j	joint owne	ership of a	single unit	?					Yes ⊠	No
	commis If a pers or states	ssion or s son to be s, list the	similar rer e listed is e name of	muneration an associa the broken	n for solic ated person r or dealer	itation of point of a second of the second o	ourchasers in of a broker han five (5)	n connection or dealer re	on with sales egistered wit be listed are	of securition of the SEC a	or indirectly es in the offe nd/or with a persons of s	ring. state	
Full	•	ast nam	e first, if i	individual)								
Busi	ness or I		e Address	s (Number	and Stree	et, City, Sta	te, Zip Cod	e)					
Nam		sociated 1	Broker or	Dealer		····			 	- 40.00			****
	s in Wh	ich Perso					icit Purchas						☐ All States
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Full	Name (I	Last nam	e first, if i	individual)								
Busi	ness or I	Residenc	e Address	s (Number	and Stree	t, City, Sta	te, Zip Cod	e)			1		
Nam	e of Ass	ociated	Broker or	Dealer									
							icit Purchas						☐ All States
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[R	1] [:	SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full	Name (L	∠ast nam	e first, if i	individual)								
Busin	ness or I	Residenc	e Address	s (Number	and Stree	t, City, Sta	te, Zip Cod	e)					
Nam	e of Ass	ociated l	Broker or	Dealer					· · ·				
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Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$18,297,261.00	\$18,297,261.00
	☐ Common ☐ Preferred (Series C)	· · · · · · · · · · · · · · · · · · ·	<u> </u>
	Convertible Securities	\$	\$
	Partnership Interests	\$	\$
	Other (Specify)	\$	\$
	Total	\$18,297,261.00	\$18,297,261.00
	Answer also in Appendix, Column 3, if filing under ULOE.	<u> </u>	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number of Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	9	\$18,297,261.00
	Non-accredited Investors	0	\$0.00
	Total (for filings under Rule 504 only)	-	\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees] \$
	Printing and Engraving Costs] \$
	Legal Fees		\$To be determined
	Accounting Fees] \$
	Engineering Fees		\$
	Sales Commissions (specify finder's fees separately)		
	Other Expenses (identify)] \$
	Total		\$To be determined

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE, N	NUMBER OF INVESTORS, EXPENSES	AND USE OF PROCE	EDS
(o. Enter the difference between the ag Question 1 and total expenses furnished in re 'adjusted gross proceeds to the issuer."	gregate offering price given in response sponse to Part C - Question 4.a. This difference	se to Part C -	\$ 18,297,261.00
(Indicate below the amount of the adjusted gused for each of the purposes shown. If the estimate and check the box to the left of the equal the adjusted gross proceeds to the issuabove.	amount for any purpose is not known, fur e estimate. The total of the payments liste	rnish an ed must	
			Payments Officers, Directors, Affiliates	& Payments To
	Salaries and fees		. 🔲 \$	□ \$
	Purchase of real estate		. 🗆 \$	\$
	Purchase, rental or leasing and installation	on of machinery and equipment	. 🗆 \$	
	Construction or leasing of plant building	s and facilities	. 🗆 \$	s
	Acquisition of other business (including offering that may be used in exchange for issuer pursuant to a merger)	the value of securities involved in this or the assets or securities of another	. 🗆 \$	□ \$
	- ·			
	Working capital			
	Other (specify):			
				\$
			. 🗆 \$	⋈ \$18,297,261.00
	Total Payments Listed (column totals ad	ded)		⊠ \$18,297,261.00
	<u> </u>	D. FEDERAL SIGNATURE		
llov	ssuer has duly caused this notice to be sign ving signature constitutes an undertaking by staff, the information furnished by the issuer	ned by the undersigned duly authorized per the issuer to furnish to the U.S. Securities	and Exchange Commissi	on, upon written request
suer	(Print or Type)	Signature	Date	
osmix Corporation		11. 1	June <u>نك</u> , 200	6
	or Signer (Print or Type)	Title of Signer (Printle) Type		
enk	atesh Harinarayan	President W/W		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)